

Site Accreditation Report – Empower

Completed: May 23rd, 2018

Levels of Care Reviewed:

Substance Use Disorder (SUD) Services
Prevention

Review Process: Empower Coalition was reviewed by Division of Behavioral Health staff for adherence to the Administrative Rules of South Dakota (ARSD) and Contract Attachments. The following information was derived from the on-site accreditation survey of your agency. This report includes strengths, recommendations, and citations for Plans of Corrections and results from reviewing policies and procedures, personnel files, and conducting an interview with the executive director.

Administrative Review Score: 71.5%

Cumulative Score: 71.5%

ADMINISTRATIVE REVIEW SUMMARY

Strengths:

Empower Coalition has detailed policies and procedures that are specifically customized to their agency. The agency's personnel files were organized and labeled specifically by sections of where to find appropriate documents. The coalition has detailed board meeting minutes and the board is meeting more than the required amount. Empower has built relationships within the community as they collaborate with schools, local law enforcement, and other coalitions. The coalition and other community agencies provide presentations for each other regarding preventions efforts and topics.

Recommendations:

1. According to ARSD 67:61:05:09 each agency shall have an up to date organizational chart indicating lines of authority from the board of directors and made available to all staff members, the board of directions, if applicable and the division. Empower had an organizational chart from 2011 in their policy and procedure manual and a current chart in their board meeting minutes. The current up to date organizational chart needs to be added to the policy and procedure manual.
2. According to ARSD 67:61:11:06 the agency shall maintain a current database of information and referral resources that is either posted or publicly distributed. Empower had a database from 2011 available in their office and a current database located on their computer. Empower should have their current database available in their office readily available for those who may need to utilize it.

3. According to ARSD 67:61:05:01 each new staff member, intern, and volunteer shall receive the two-step method of tuberculin skin test or a TB blood assay test to establish a baseline within 14 days of employment. Any two documented tuberculin skin tests completed within a 12 month period before the date of employment can be considered a two-step or one TB blood assay test completed within a 12 month period before employment can be considered an adequate baseline test. The one personnel file reviewed only contained record of one TB test being completed within one year of hire however the director was able to fax the division the record of the second TB test completed. Empower should review their personnel files to ensure all necessary information is included. This area was also non-compliant on the last accreditation review completed in March of 2016.

Plan of Correction:

The following areas will require a plan of correction to address each rule of non-compliance which shall include an updated policy and/or procedure, a time frame for implementation of this procedure, the staff position or title responsible for implementation and the staff position or title responsible for ensuring continued compliance of these rules.

1. The agency shall update their policies and procedures manual to establish compliance with Administrative Rules and procedures for reviewing and updating the manual according to ARSD 67:61:04:01. The agency's policy and procedure manual still references ARSD 46:05 and needs to be updated to reference ARSD 67:61. Empower Coalition has detailed policies and procedures that are specifically customized to their agency but need to be updated to the new rules for full compliance.
2. Each agency shall develop root cause analysis policies and procedures to utilize in response to sentinel events according to ARSD 67:61:02:21. Each agency shall report to the division within 24 hours of any sentinel event including: death not primarily related to the natural course of the client's illness or underlying condition, permanent harm or severe temporary harm and intervention require to sustain life. A policy and procedure on sentinel events should be created to be in compliance with ARSD 67:61:02:21. The coalition did not have a policy regarding sentinel events.
3. Agency staff providing prevention programming shall complete the Substance Abuse Prevention Skills Training (SAPST) or Foundations of Prevention within one year of hire. Evidence of completion shall be placed in the staff member's personnel file according to ARSD 67:61:05:04. The one personnel file reviewed did not have a SAPST training completed within one year of hire. The employee was hired on 2/1/16 and according to the director left the agency in November of 2017. There was a SAPST training offered in May of 2016 the employee could have attended.
4. According to ARSD 67:61:04:05 an accredited agency shall maintain an accounting system pursuant to generally accepted accounting principles. If requested by the department, the agency shall submit to the department a copy of an annual entity-wide, independent financial audit. Empower only had one audit completed since the last accreditation review. This area was also non-compliant on the last accreditation review completed in March of 2016.

5. An agency shall conduct a quality assurance review of its prevention programming to monitor, protect, and enhance the quality and appropriateness of its programming and to identify qualitative problems and recommend plans for correcting each problem according to ARSD 67:61:11:08. Empower did not complete the annual quality assurance report that included qualitative problems and plans for correcting each problem. This area was also non-compliant on the last accreditation review completed in March of 2016.
6. The agency's program director shall review and approve all electronic, written, and printed materials intended for public distribution for validity, relevancy, and appeal according to ARSD 67:61:11:04. The director reported she reviews the material however there was not record of the review in electronic or printed format as she was unable to find the record at the time of review. The director should ensure a policy that clearly documents materials are reviewed and approved.